

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-03537A

NEW LIFE TRUST, INC. dba

3412 West 2nd

Anacortes WA 98221



Dakeland Utilities

RECEIVED

APR 13 2006

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

ANNUAL REPORT

FOR YEAR ENDING

12	31	2005
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FOR COMMISSION USE

ANN04	05
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entered
41306 RF

COMPANY INFORMATION

Company Name (Business Name) <u>New Life Trust, Inc</u>		
Mailing Address <u>3412 West 2nd</u>		
<u>Anacortes</u> (City)	<u>WA</u> (State)	<u>98221</u> (Zip)
<u>360-293-2105</u> Telephone No. (Include Area Code)	<u>360-293-2061</u> Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)
Email Address <u>iambenthomas@hotmail.com</u>		
Local Office Mailing Address <u>P.O. Box 3247</u>		
<u>Dateland</u> (City)	<u>AZ</u> (State)	<u>85333</u> (Zip)
<u>928-454-2700</u> Local Office Telephone No. (Include Area Code)	 Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)
Email Address _____		

MANAGEMENT INFORMATION

Management Contact: <u>Ben Thomas</u>		<u>Secretary</u>	
(Name)		(Title)	
<u>3412 West 2nd street</u> (Street)	<u>Anacortes</u> (City)	<u>WA</u> (State)	<u>98221</u> (Zip)
 Telephone No. (Include Area Code)	 Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)	
Email Address _____			
On Site Manager: <u>Sun state Environmental Services</u>			
(Name)			
<u>P.O. Box 545</u> (Street)	<u>Yuma</u> (City)	<u>AZ</u> (State)	<u>85366</u> (Zip)
<u>928-341-9685</u> Telephone No. (Include Area Code)	 Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)	
Email Address _____			

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: <u>Linda Swanson</u>			
(Name)			
<u>1478 Ave. 64E (HCI Box 30)</u>	<u>Doteland</u>	<u>AZ</u>	<u>85333</u>
(Street)	(City)	(State)	(Zip)
<u>928-454-2700</u>			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Attorney: <u>NA</u>			
(Name)			
(Street) (City) (State) (Zip)			
Telephone No. (Include Area Code)		Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)	

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S) | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input checked="" type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

COMPANY NAME *New Life Trust, Inc.*

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	<i>\$6,000.00</i>		<i>\$6,000.00</i>
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	<i>\$6,000.00</i>	<i>0</i>	<i>\$6,000.00</i>

This amount goes on the Balance Sheet Acct. No. 108 

COMPANY NAME New Life Trust, Inc.

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights	\$6,000.00	0	0
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	\$6,000.00		

This amount goes on the Comparative Statement of Income and Expense _____
Acct. No. 403.

COMPANY NAME *New Life Trust, Inc.*

BALANCE SHEET

as of 12-31-2005

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 961.00	\$ 1,250
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		420
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 961.00	\$ 1,670
	FIXED ASSETS		
101	Utility Plant in Service	\$ 6,000.00	\$ 6,000
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 6,000	\$ 6,000
	TOTAL ASSETS	\$ 6,971	\$ 7,670

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

COMPANY NAME *New Life Trust Inc.*

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITIES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes	1,184	357.14
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		3,321.45
	TOTAL CURRENT LIABILITIES	\$ 1,184	\$ 3,678.59
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$ 1,184	\$ 3,678.59
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$ 5,777	\$ 5,777
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		<1,785.59>
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$ 5,777	\$ 3,991.41
	TOTAL LIABILITIES AND CAPITAL	\$ 6,961.00	\$ 7,670.00

COMPANY NAME *New Life Trust, Inc.*

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 5,030	\$ 4,434.20
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$ 5,030	\$ 4,434.20
	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power	923	753.48
618	Chemicals		
620	Repairs and Maintenance	565	3,146.63
621	Office Supplies and Expense		
630	Outside Services	2,100	2,070.00
635	Water Testing		351.01
641	Rents		
650	Transportation Expenses		
657	Insurance - General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense - Rate Case		
675	Miscellaneous Expense	320	952.65
403	Depreciation Expense		
408	Taxes Other Than Income	357	
408.11	Property Taxes	827	827.35
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 5,092	\$ 8,141.12
	OPERATING INCOME/(LOSS)	\$ <62>	\$ <3,666.92>
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$	\$
	NET INCOME/(LOSS)	\$ <62>	\$ <3,666.92>

COMPANY NAME New Life Trust, Inc.

SUPPLEMENTAL FINANCIAL DATA

Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.		N/A		
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

\$ 0

Meter Deposits Refunded During the Test Year

\$ 0

COMPANY NAME *New Life Trust, Inc.*

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
<i>W 03537A</i>	<i>15 HP</i>	<i>125 GPM</i>	<i>550</i>	<i>12</i>	<i>Ø</i>	<i>1970</i>

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
<i>N/A</i>		

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
<i>N/A</i>			

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
		<i>5,000</i>	<i>1</i>

COMPANY NAME New Life Trust, Inc.

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6	PVC	26,225
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X 3/4	15
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

None

STRUCTURES:

None

OTHER:

None

COMPANY NAME: New Life Trust, Inc.

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2005

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY	15	100,390	100,390
FEBRUARY	15	80,780	80,780
MARCH	15	93,100	93,100
APRIL	15	118,490	118,490
MAY	15	184,660	184,660
JUNE	15	209,260	209,260
JULY	15	212,740	212,740
AUGUST	15	75,040	75,040
SEPTEMBER	15	157,930	157,930
OCTOBER	15	133,870	133,870
NOVEMBER	15	69,000	69,000
DECEMBER	15	91,840	91,840
TOTAL		1,527,100	1,527,100

Is the Water Utility located in an ADWR Active Management Area (AMA)?

() Yes (X) No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?

() Yes (X) No

If yes, provide the GPCPD amount: _____

What is the level of arsenic for each well on your system. .031 mg/l
(If more than one well, please list each separately.)

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME New Life Trust, Inc. YEAR ENDING 12/31/2005

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2005 was: \$ 827.35

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

3602932061

YUMA COUNTY TREASURER**PROPERTY TAX RECEIPT**

Account: U0000012 Receipt Date: 26-JUL-2005 Print Date: 08-FEB-2006 Page: 1
 Parcel No: ----- Receipt No: 40077758 TransNo: 53050726094004

Owner Name and Address Information**Property Location**

DATELAND UTILITIES
 C/O DOUGLAS JOHNSON
 PO BOX 3250
 DATELAND AZ 85333

Legal Description

CENTRAL LY VALUED PROPERTY ACCOUNT 55-033. PARCELS 209-51-288, 209-51-289.

Payor	MOP	Reference	Amount Paid
NEW LIFE TRUST INC	Check	689408445	\$737.65

Year	Applied as	Tax Paid	Int Paid	Fee Paid	Other Paid	Total Paid
2003	TAX Whole	306.82	73.64	0.00	0.00	380.46
2004	TAX Whole	330.74	26.45	0.00	0.00	357.19

Year	Tax Due	Int Due	Other Due	Total Due	Payments	Balance Due
2005	292.62	0.00	0.00	292.62	292.62	0.00
2004	330.74	26.45	0.00	357.19	357.19	0.00
2003	306.82	73.64	0.00	380.46	380.46	0.00

BALANCE DUE AS OF 02/08/2006 0.00

THANK YOU FOR YOUR PAYMENT

All payments made by check are subject to final bank clearance.

YUMA COUNTY TREASURER

410 MAIDEN LN STE C

YUMA, AZ 85364

**VERIFICATION
AND
SWORN STATEMENT**
Taxes

RECEIVED

APR 13 2006

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

VERIFICATION

STATE OF Arizona
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME) <u>Yuma</u>
NAME (OWNER OR OFFICIAL) TITLE <u>Benjamin Thomas</u> <u>Secretary</u>
COMPANY NAME <u>New Life Trust, Inc.</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

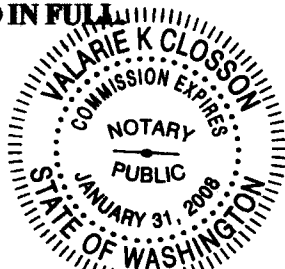
MONTH <u>12</u>	DAY <u>31</u>	YEAR <u>2006</u>
--------------------	------------------	---------------------

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.



SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

30th

DAY OF

(SEAL)

MY COMMISSION EXPIRES 1-31-08

Benjamin Thomas
SIGNATURE OF OWNER OR OFFICIAL
360-293-2105
TELEPHONE NUMBER

COUNTY NAME <u>Sagit</u>	
MONTH <u>march</u>	. <u>20</u> <u>06</u>

Valarie K. Closson
SIGNATURE OF NOTARY PUBLIC

COMPANY NAME New Life Trust, Inc. YEAR ENDING 12/31/2005

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported _____
Estimated or Actual Federal Tax Liability 0

State Taxable Income Reported _____
Estimated or Actual State Tax Liability 0

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances 0
Amount of Gross-Up Tax Collected 0
Total Grossed-Up Contributions/Advances 0

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

Robert J Thomas
SIGNATURE

4-06-2006
DATE

Robert J Thomas
PRINTED NAME

President
TITLE

RECEIVED

APR 13 2006

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only

VERIFICATION

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	<u>Yuma</u>	
NAME (OWNER OR OFFICIAL) TITLE	<u>Benjamin</u>	<u>N. Thomas</u>
COMPANY NAME	<u>New Life Trust Inc.</u>	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2005</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2005 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 4,753.47

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 319.27
IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

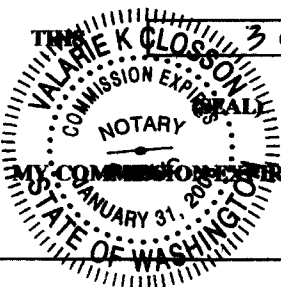
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 30th DAY OF

COUNTY NAME	<u>Skagit</u>	
MONTH	<u>march</u>	<u>2004</u>

Benjamin N. Thomas
SIGNATURE OF OWNER OR OFFICIAL
360-293-2105
TELEPHONE NUMBER

Valerie K. Closson
SIGNATURE OF NOTARY PUBLIC



1-31-08

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY**

RECEIVED

APR 13 2006

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>Yuma</u>	
NAME (OWNER OR OFFICIAL) <u>Ben Thomas</u>	TITLE <u>secretary</u>
COMPANY NAME <u>New Life Trust, Inc.</u>	

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION
FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2005

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

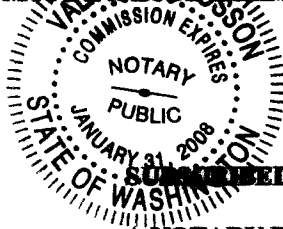
SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2005 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES
<u>\$ 4753.47</u>

**(THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 319.27
IN SALES TAXES BILLED, OR COLLECTED)**

***RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.**



Benjamin Thomas
SIGNATURE OF OWNER OR OFFICIAL

360-293-2105

TELEPHONE NUMBER

**SUBSCRIBED AND SWORN TO BEFORE ME
A NOTARY PUBLIC IN AND FOR THE COUNTY OF**

THIS

30th

DAY OF

NOTARY PUBLIC NAME <u>Valarie K. Closson</u>	
COUNTY NAME <u>Skagit</u>	
MONTH <u>march</u>	.20 <u>04</u>

(SEAL)

MY COMMISSION EXPIRES

1-31-08

X *Valarie K. Closson*
SIGNATURE OF NOTARY PUBLIC